FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

PROCESSED

AUG 1 1 2008

THOMSON REUTERS

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

OMB APPRO	VAL
OMB Number:	3235-0076
Expires:	
Estimated average	burden
hours per response	16.00

SEC USE ONLY								
Prefix	Serial							
DATE REC	EIVED							
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) Telephone Num	nber (Including Area Code)
303-633-4735	, ,
· · · · · · · · · · · · · · · · · · ·	mber (Including Area Code)
r (please specify):	- 08057481
ate: DE	
D or Section 4(6), 17 C	EFR 230.501 ct seq. or 15 U.S.C.
	ed filed with the U.S. Securities at that address after the date on
20549.	
sally signed. Any copi	es not manually signed must be
	ssuer and offering, any changes B. Part E and the Appendix need
e Securities Administ for the exemption, a	those states that have adopted trator in each state where sales fee in the proper amount shall the notice constitutes a part of
	r (please specify):  stimated tate:  DE  Dor Section 4(6), 17 Coing. A notice is deemen below or, if received 20549.  ually signed. Any copic applied in Parts A and Emplied in Parts A

filing of a federal notice.

A BASIG IDENTIFICATION DATA	
Enter the information requested for the following:	
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of	I'the issuer.
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
Each general and managing partner of partnership issuers.	
heck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
fountain View GP, LLC ull Name (Last name first, if individual)	
99 18th St., Ste. 1001, Denver, CO 80282-2401 usiness or Residence Address (Number and Street, City, State, Zip Code)	
heck Box(es) that Apply: Promoter   Beneficial Owner   Executive Officer   Director   General and/or   Managing Partner	
Mountain View Capital Holdings, LLC ull Name (Last name first, if individual)	
999 18th St., Ste. 1001, Denver, CO 80282-2401 usiness or Residence Address (Number and Street, City, State, Zip Code)	
dolliess of Nesidence Fiduress (Fidurest and Street, Oily, State, Esp Code)	
check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Michael P. Morgan	
ull Name (Last name first, if individual)	
999 18th St., Ste. 1001. Denver, CO 80282-2401 usiness or Residence Address (Number and Street, City, State, Zip Code)	
usiness of residence Address (Addition and Street, Stey, State, Esp Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Christopher Rooker ull Name (Last name first, if individual)	
999 18th St., Ste. 1001, Denver, CO 80282-2401 usiness or Residence Address (Number and Street, City, State, Zip Code)	
heck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Froy Anderson ull Name (Last name first, if individual)	
600 Six Flags Drive #250, Arlington, TX 76011  usiness or Residence Address (Number and Street, City, State, Zip Code)	
heck Box(cs) that Apply: Promoter Deneficial Owner Executive Officer Director General and/or Managing Partner	
Theodore Abarintes ull Name (Last name first, if individual)	
999 18th St., Ste. 1001, Denver, CO 80282-2401 utsiness or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
ull Name (Last name first, if individual)	
usiness or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	
the state of the s	

					Н. Б	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sol	d, or does ti	he issuer i	ntend to se	ll to non-a	ccredited i	nvectors in	this offer	ing?		Yes	No Em
1.	rias inc	. 1330.01 301	u, or does to			n, to non-a Appendix				Ū			<b>23</b>
2.	What is	the minim	num investr					_				\$ none	<u>.</u>
							,					Yes	No
3.	Does th	e offering	permit join	t ownershi	ip of a sing	le unit?							X
4.	commis If a pers or state	ssion or sim son to be lis s, list the na	ilar remune ited is an as:	ration for : sociated pe roker or d	solicitation erson or age ealer. If me	of purchasent of a brokers ore than five	ers in conne ter or deale e (5) person	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	irectly, any he offering. with a state ons of such		
Ful	J Name (	Last name	first, if ind	ividual)		-						·	
$\frac{N!}{n}$		Daridanca	Address (N	lumbor on	d Street Ci	ity State 7	'in Code)						
Dus	omess or	Residence	Addiess (N	dilloci an	u sireet, Ci	ity, State, 2	.ip Code)						
Naı	ne of As	sociated B	roker or De	aler							•		
Sta	tes in Wi	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individua	l States)		***************************************	*************		*************		☐ AL	l States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NI TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	ividual)		<del></del>							
Bus	siness or	Residence	: Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nar	ne of As	sociated B	roker or De	aler									
Sta	tes in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		,				
	(Check	"All State:	s" or check	individual	l States)		•••••		***************************************	•••••		□ Al	l States
	IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	ividual)									<del>.</del>
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, I	Zip Code)						
Naı	ne of As	sociated B	oker or De	aler				· · · · · ·					<u> </u>
Stat	tes in Wi	nich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	•••••	***************************************				••••••	☐ Al	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

## C: OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and				
	already exchanged.  Type of Security	Aggregate Offering Price		An	nount Already Sold
		_			
	Debt				0
	Equity	0	—	<b>s</b>	0
	Common Preferred				
	Convertible Securities (including warrants)		_		0
	Partnership Interests				77,955,631
	Other (Specify)				
	Total	77,955,631		\$	77,955,631
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
		Number Investors			ollar Amount of Purchases
	Accredited Investors	16		\$_	77,955,631
	Non-accredited Investors	0		\$_	0
	Total (for filings under Rule 504 only)		_	<b>\$</b> _	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering	Type of Security		D	ollar Amount Sold
	Rule 505		_	\$_	
	Regulation A		_	\$_	
	Rule 504			\$_	
	Total			<b>S</b> _	0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs	*************		<b>s_</b>	0
	Legal Fees		$\overline{\mathbb{Z}}$	<b>s</b> _	350,000
	Accounting Fees	•••••	$\overline{\mathbf{x}}$		40,000
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)	•••••		\$_	0
	Other Expenses (identify)		<u>X</u>	<b>s</b>	90,000
	Total		[X]		480,000

	C. OFFERING PRICE, NUMBER OF IN	IVESTORS, EXPENSES AND USE OF PR	OCI	EDS		
	b. Enter the difference between the aggregate offering price gi and total expenses furnished in response to Part C — Question 4 proceeds to the issuer."	l.a. This difference is the "adjusted gross			\$ <u>77,47</u>	75,631
5.	Indicate below the amount of the adjusted gross proceed to the each of the purposes shown. If the amount for any purpose check the box to the left of the estimate. The total of the payme proceeds to the issuer set forth in response to Part C — Que	is not known, furnish an estimate and ents listed must equal the adjusted gross				
			O Dir	ments to Officers, ectors, & filiates	•	yments to Others
	Salaries and fees		\$_	0	<b>S</b>	0
	Purchase of real estate		J <b>\$</b>	0	□ \$	0
	Purchase, rental or leasing and installation of machinery and equipment		<b>S</b>	0	□\$	0
	Construction or leasing of plant buildings and facilities	<del></del>				
	Acquisition of other businesses (including the value of secur offering that may be used in exchange for the assets or secur issuer pursuant to a merger)	rities involved in this rities of another			_	0
	Repayment of indebtedness	<del></del>				0
	Working capital				_	
	Other (specify): Investments in mortgage loans, closing costs, ser	<del></del>			□ <b>\$</b> _	0
			] \$ <u>.4</u> .	700,000	\$	2,775,631
	Column Totals		] \$ <u>_4</u>	,700,000	□\$ <u>-7</u> :	2,775,631
	Total Payments Listed (column totals added)			<b>\$_77</b>	,475,631	_
	D. FEI	DERAL SIGNATURE				
sig	e issuer has duly caused this notice to be signed by the undersign nature constitutes an undertaking by the issuer to furnish to the information furnished by the issuer to any non-accredited inv	U.S. Securities and Exchange Commissi	on, ı	ıpon writter		
551	uer (Print or Type) Signature	e Di	ate	7/-	1.4	
do	untainView Mortgage Opportunities Fund, LP	· vh · rh		7/31	108	
	President o	Signer (Print or Type) of MountainView Captial Holdings, LLC, the s			ountainVi	ew GP, LLC,
νЦС	the Genera the Genera	al Partner of MountainView Mortgage Opportu	nities	Fund, LP		<del></del>

## - ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		e. State signat	TRE			
1.	Is any party described in 17 CFR 230.26 provisions of such rule?		•		Yes	No 🔯
		See Appendix, Column 5, for	state response.			
2.	The undersigned issuer hereby undertake D (17 CFR 239.500) at such times as rea	-	trator of any state	in which this notice is	filed a not	tice on Form
3.	The undersigned issuer hereby undertak- issuer to offerees.	es to furnish to the state admin	istrators, upon w	ritten request, informa	tion furn	ished by the
4.	The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the burden of esta	the state in which this notice is	filed and underst	ands that the issuer clai		
	uer has read this notification and knows the c thorized person.	contents to be true and has duly	caused this notice	to be signed on its beha	alf by the	undersigned
Issuer (	Print or Type)	Signature		Date		
Mountair	nView Mortgage Opportunities Fund, LP	10 nd	M	7/3	1/08	
Name (	Print or Type)	Title (Print or Type)	T T			
Michael	P. Mergan	President of MountainView the General Partner of Mour			dountain V	iew GP. LLC.

Michael P. Morgan

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AI	PENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				under Sta (if yes, explant waiver	ification ite ULOE
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK			1						
AZ			4						
AR									
CA									
со		X	Partnership Interest	4	\$24,405,631	0	0		X
СТ									
DE		J							
DC									
FL									
GA									
ні		<b>1</b>							
ID								I	
пL									
IN									
lA							=		
KS									
KY									
LA		X	Partnership Interest	1	\$100,000	0	0		X
ME									***************************************
MD									
MA									
МІ									
MN									i
MS									

				APP	ENDIX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH			-						
ŊJ		X	Partnership Interest	ı	\$750,000	0	0		X
NM									
NY									
NC									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ND									
ОН									
ок								(	
OR									
PA		X	Partnership Interest	8	\$17,600,000	0	0		X
RI									
SC									
SD									
TN									
TX		X	Partnership Interest	1	\$100,000	0	0		X
υτ									
VT									
VA									
WA			-						
wv									
WI									
L	<u> </u>	1	1	l	l	I		Communication	Lannaman.i

1	to non-a	d to sell accredited is in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	aggregate ring price ring price ring trice r	amount purchased in State (Part C-Item 2)				ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR						<b>-</b>			

